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APPLICANTS

Donald P. Andersen, Batesville, IN;
 Edward W. Catton, New Palestine, IN;
 James P. Hentges, Fountain City, WI;
 William C. Bohlenger, Buffalo City, WI;
 Stanton H. Breitlow, Winona, MN;

** CONTINUING DATA *****

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** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
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35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> DLC	IN	20	34	8
Verified and Acknowledged	/DONNIE L CROSLAND/ Examiner's Signature	Initials				

ADDRESS

BARNES & THORNBURG LLP
 11 SOUTH MERIDIAN
 INDIANAPOLIS, IN 46204
 UNITED STATES

TITLE

Gas alert for medical gas system

FILING FEE RECEIVED 3300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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